

DOCKET: 915-008.14

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re Application of: Antti Vaha-Sipila

U.S. Serial No.: 10/667,297

Examiner: Techane GERGISO

Filed: September 19, 2003

Group Art Unit: 2137

For: SOFTWARE INTEGRITY TEST

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action of March 21, 2006, please amend the abovereferenced patent application as follows:

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to Mail Stop Amendment,

Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

une 21, 2006

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PTO/SB/17 (01-06)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL For FY 2006 Applicant daims small entity status. See 37 CFR 1.27 Art Unit Zammer Name T. Gergiso T. Ge					Complete if Known					
Applicant claims small entity status. See 37 CFR 1.27 COTAL AMOUNT OF PAYMENT (\$) Attomic Docket No. 2137 Attomic Docket No. 215-008.14	Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL				Application Number 10/667,			97		
Applicant datins small entity status. See 37 CFR 1.27 Art Unit 2137 Attomey Docket No. 315-008.14					Filing Date	Septem		er 19, 200	03	
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National Content 1915-008.14 2137 215-008.14 21	Applicant claims amell actity status. See 27 CER 1.27				Examiner Name		T. Gergiso			
METHOD OF PAYMENT (check all that apply) ✓ Check					Art Unit		2137			
Check	TOTAL AMOUNT OF PAYMENT (\$)				Attorney Docket I	No.	915-008.1	14		
Deposit Account Deposit Account Number, 23-0442 Deposit Account Name:	METHOD OF PAYMENT (check all that apply)									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below	Check Credit Card Money Order None Other (please identify):									
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments WARNING: Information on this form may become public, Credit card Information should not be included on this form. Provide credit card Information and authorization on Pro-2088. FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES SEARCH FEES Small Entity Application Type Fee (3) Fee (3) Fee (3) Fee (3) Fee (3) Fee (4) Fee (5) Fee (6) Fee (5) Fee (5) Fee (6)	Deposit Account Deposit Account Number. 23-0442 Deposit Account Name:									
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
MANNING: Information on this form may be become public. Credit card Information should not be included on this form. Provide credit card Information and authorization on PTO-2038. FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)	Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
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### TEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) ### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES SEARCH FEES Small Entity Fee (\$) F	Under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card									
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Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Each independent claims over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims 8 - 3 or HP = 5 x 200.00 = 150.00 HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof - 100 =	Provisional	200	100	0	0	() ()		
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Total Claims 23 - 20 or HP = 3 x 50.00 = 150.00 HP = highest number of total claims paid for, if greater than 20. Indep. Claims 8 - 3 or HP = 5 x 200.00 = 1000.00 HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof - 100 = /50 = (round up to a whole number) x = 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): SUBMITTED BY Registration No. (Attomey/Agent) 31,391 Telephone (203) 261-1234									100	
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NOME CHARTICLUMOUS ARRAIG STATEMENT /)	Name (Print/Type) Francis J. Maguire (Attorney/Agent) 31,391							Date June 21, 2006		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.